

Constance Care East Renfrewshire and Renfrewshire Housing Support Service

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Unannounced

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Service provided by:
Constance Care Limited

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About the service

Constance Care East Renfrewshire and Renfrewshire is a combined Housing Support Care at Home service. The service was first registered with the Care Inspectorate on 12 December 2019. The service is provided to adults and older people with assessed support needs who are living in their own homes. The stated aim of the service is 'to provide high quality support to enable people of all ages to be cared for in their own home for as long as is possible'.

What people told us

We did not obtain people's views on this inspection which was focussed on following up complaint requirements.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

To ensure people experiencing care can be confident that the service promotes their health and wellbeing, the provider must by 09 April 2021 review all systems of communication to ensure:

accurate records are maintained which reflect the care interventions of all staff

information regarding people's care is prioritised and shared with all relevant staff, associated professionals and family/representatives

full written records are maintained in line with the service policy and procedure

all accidents/incidents are promptly documented and appropriate action taken.

To be completed by: 09 April 2021

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 5 February 2021.

Action taken on previous requirement

People experiencing care should be confident that their health and wellbeing needs are well supported, and that staff respond to changes in their presentation. During the complaint investigation we identified concerns with staff practice in this regard. We reviewed progress at this visit and found improvement had been made.

A new and fully digital system for planning and monitoring all care delivery has been introduced. Using mobile devices, staff now have access to real time information relating to people's care and support needs. Arrival and departure times are logged for all staff, with delays generating an alert on staff location for office coordinators. All delivered support must be signed off, with omissions generating an action for office staff. People experiencing care had similar access to the system to ensure improved transparency in the support provided.

We viewed the system in operation and were satisfied that people's care needs were being more closely monitored.

Met - outwith timescales**Requirement 2**

To ensure people experiencing care are safely supported with their medication, by 09 April 2021 the provider must ensure:

all medication is prompted in line with the prescriber instructions

all medication administration records are accurately maintained and audited.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 5 February 2021.

Action taken on previous requirement

People experiencing care should be confident that they are safely supported with their medication. During the complaint investigation we highlighted a number of concerns relating to medication practices.

On this visit we reviewed the progress made in respect of medication practice and recording. We found improvement had been made.

The introduction of the new digital system has addressed the inconsistency noted in recording practice. Quality officers set up the initial support requirements based on the prescribed medication which ensures staff adhere to this as allocated support tasks. Any issues arising with medication are notified to branch staff in real time. Checks on medication administration practice are being made by Quality Team staff.

We viewed the system in operation and were satisfied that people's care needs were being more closely monitored with action taken on issues as required.

Met - outwith timescales

Requirement 3

To ensure people experiencing care can have confidence in those supporting them, the provider must by 09 April 2021 ensure that all staff are appropriately trained and skilled in the management of medication and have a direct observation of practice, to assess competence, undertaken.

To be completed by: 09 April 2021

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

This is in order to comply with: Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 5 February 2021.

Action taken on previous requirement

People experiencing care should be confident that the staff team have received training appropriate to their role and they are supported to develop their practice. During the complaint investigation we identified concerns with the training and development opportunities for staff and we highlighted improvements that were required.

On this visit, we reviewed the progress made in respect of staff training and development and found some improvement had been made.

Records showed that some staff had attended sessions on Impact and Consequences, Medication and Record Keeping training and that themed supervision and direct observation had been used to monitor staff practice, and identify issues and development needs.

While we were satisfied that progress had been made in relation to staff training, we would want assurance that all staff have attended mandatory medication training and that effective systems are in place to ensure regular updates and monitoring of practice are maintained.

Not met**Requirement 4**

To ensure people can have confidence in the care service, the provider must by 09 April 2021 ensure:

adherence to the complaints policy/procedure when responding to issues raised with them

complaints are logged and acknowledged upon receipt

complainants receive a copy of the complaints procedure where requested

communication with complainants to clarify issues for investigation

all complaints are fully investigated

complainants are issued with a final response within agreed timescales.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: Complaints 18 (3, 4 and 5).

To be completed by: 09 April 2021

This is to ensure care and support is consistent with Health and Social Care Standard 4.21: If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me.

This is in order to comply with: Regulation 18(3) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 5 February 2021.

Action taken on previous requirement

People experiencing care should be confident that the provider will, respond promptly and in accordance with their procedure on complaint handling. During the complaint investigation we identified that the provider had not followed their procedure in responding to complaints raised with them.

On this visit, we followed up on the progress made by the service in respect of complaint handling. All complaints are now logged on the new digital system and a letter is issued to complainants acknowledging receipt. While no timescale is shared with the complainant at this stage, it is noted that the service policy commits to completing the investigation within 30 days. We discussed improving the complaint handling process in relation to the communication with complainants around timescales and this was acknowledged as an area for action.

The service currently has a backlog of complaints awaiting final response and the management team were actively engaged in dealing with these at the time of the Care Inspectorate visit.

Overall, while we found that progress had been made, further work would ensure complaint handling was managed timeously and effectively through improved communication with complainants.

Not met

Requirement 5

To ensure people experiencing care can feel safe and confident, the provider must by 09 April 2021 ensure that all staff are aware of and exercise their responsibility to protect people from harm, and take appropriate action when a deterioration in their health and wellbeing is observed.

To be completed by: 09 April 2021

This is to ensure care and support is consistent with Health and Social Care Standard 3.21: I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 5 February 2021.

Action taken on previous requirement

People experiencing care should be confident that all staff understand and act upon their responsibility to protect people from harm. During the complaint investigation we noted that staff had not acted promptly and appropriately in response to a deterioration in the wellbeing of a person that was at risk.

On this visit, we followed up on the progress made by the provider in supporting staff knowledge and understanding of adult protection. We were not satisfied that staff had attended training which supported this aspect of their work. Additional work is needed to ensure all staff have the opportunity to attend training on adult protection and that systems are in place to monitor their confidence and competence in this area.

Not met

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To ensure the health and wellbeing needs of people experiencing care can be met and to promote consistency, the provider should:

agree timings of care visits in advance of the service starting and deliver support in line with this

alert the person experiencing care and or their family/representative of any delays in staff attending for visits

minimise the number of staff supporting the person experiencing care

ensure any changes to the service required are promptly reported to all relevant people.

This is to ensure care and support is consistent with Health and Social Care Standard 3.19: My care and support is consistent and stable because people work together well.

This area for improvement was made on 9 April 2021.

Action taken since then

People experiencing care should be confident that the provider has effective systems in place to manage their care and support needs well. During the complaint investigation we found that care and support was not well planned and improvement was needed to ensure better outcomes for people using the service.

On this visit we followed up on the progress made in respect of care planning and support. We sampled care plans and found good person-centred information had been recorded. The new digital recording system has addressed issues around the timing and duration of care visits as well as providing immediate alerts when visits were not completed. Improvements had been made to the rostering system with training provided to staff responsible for this. This meant that support could be delivered by a smaller team of staff. People experiencing care and their families can now access an online portal which gives access to records relating to their care and support and this has improved the transparency of the service provided.

This Area for Improvement has been met.

Previous area for improvement 2

For the nutrition and hydration wellbeing needs of people experiencing care to be fully met, the provider should ensure:

a support plan is developed which sets out how people's needs will be met and monitored

adequate time and assistance is given to support people at each visit

staff are familiar with the service policies and procedures on nutrition and hydration

staff have received relevant nutrition and hydration training

staff are aware of risk factors relating to hydration and nutrition and take prompt action to report this.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

This area for improvement was made on 9 April 2021.

Action taken since then

People experiencing care should have confidence that staff have knowledge and will support them with their specific dietary needs. On the complaint visit we identified concerns in relation to the support provided by staff with food and fluid intake. On this visit we sampled care plans and found information recorded in relation to people's dietary likes and dislikes and any specific risks relating to eating and drinking were noted. The new online digital recording system sets out the specific care and support to be provided with missed tasks generating an immediate alert to office staff who in turn follow up with field staff. Overall, we found that good progress had been made.

This Area for Improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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